



APPLICATION FOR PERMIT
TO APPROPRIATE PUBLIC WATERS OF THE STATE OF WASHINGTON

☐ SURFACE WATER

☒ GROUND WATER

\$10.00 MINIMUM STATUTORY EXAMINATION FEE REQUIRED WITH APPLICATION

(GRAY BOXES FOR OFFICE USE ONLY)

| | | | | | |
|-----------------------------------|-----------------------|-------------------------|---------------------------------|------|----------------------|
| APPLICATION NO. G430212 | W.R.I.A. 37 | COUNTY Yakima | PRIORITY DATE 3-15-90 | TIME | ACCEPTED <i>R</i> |
|-----------------------------------|-----------------------|-------------------------|---------------------------------|------|----------------------|

APPLICANT'S NAME - PLEASE PRINT

(James M. Campbell dba Campbell Orchards Inc)

Bus. Tel.

Home Tel. **966-8798**

Other Tel.

ADDRESS (STREET)

614 Bellevue Pl.

(CITY)

(Yakima, WA)

(STATE)

98908

(ZIP CODE)

DATE & PLACE OF INCORPORATION IF APPLICANT IS A CORPORATION

1. SOURCE OF SUPPLY

IF SURFACE WATER

SOURCE (NAME OF STREAM, LAKE, SPRING, ETC.) (IF UNNAMED, SO STATE)

TRIBUTARY

IF GROUND WATER

SOURCE (WELL, TUNNEL, INFILTRATION TRENCH, ETC.)

SIZE AND DEPTH

(A well)

2. USE

USE TO WHICH WATER IS TO BE APPLIED (DOMESTIC SUPPLY, IRRIGATION, MINING, MANUFACTURING, ETC.)

(Frost Protection as needed)

ENTER QUANTITY OF WATER
REQUESTED USING UNITS OF:

CUBIC FEET PER SECOND (CFS)

OR

GALLONS PER MINUTE (GPM)

(800 GPM)

ACRE FEET PER YEAR

TIMES DURING YEAR WATER WILL BE REQUIRED

Frost protection season

IF IRRIGATION, NUMBER OF ACRES

80

IF DOMESTIC USE, NUMBER OF
UNITS BY TYPE, E.G. 1-HOME,
1-MOBILE HOME, 2-CAMPSITES, ETC.

IF MUNICIPAL USE, ESTIMATED
POPULATION
20 YEARS FROM TODAY

DATE PROJECT WAS OR WILL BE STARTED

ASAP

DATE PROJECT WAS OR WILL BE COMPLETED

3. LOCATION OF POINT OF DIVERSION/WITHDRAWAL

3A. IF IN PLATTED PROPERTY

| | | | | | |
|-----|-------|------------------------------------|---------|------|-------|
| LOT | BLOCK | OF (GIVE NAME OF PLAT OR ADDITION) | SECTION | TOWN | RANGE |
|-----|-------|------------------------------------|---------|------|-------|

ALSO, PLEASE ENCLOSE A COPY OF THE PLAT AND
MARK THE POINT(S) OF WITHDRAWAL OR DIVERSION

3B. IF NOT IN PLATTED PROPERTY

ON ACCOMPANYING SECTION MAPS, ACCURATELY MARK AND IDENTIFY EACH POINT OF DIVERSION. SHOW
NORTH-SOUTH AND EAST-WEST DISTANCES FROM NEAREST SECTION CORNER OR PROPERTY CORNER.

ALSO, ENTER BELOW THE DISTANCES FROM THE NEAREST SECTION OR PROPERTY CORNER TO THE DIVERSION OR WITHDRAWAL.

LOCATED WITHIN (SMALLEST LEGAL SUBDIVISION)

(SE 1/4 NW 1/4)

SECTION

11

TOWNSHIP N.

12 N

RANGE (E. OR W.) W.M.

18 E

COUNTY

Yakima

4. DO YOU OWN THE LAND ON WHICH THIS SOURCE IS LOCATED. IF NOT, INSERT NAME & ADDRESS OF OWNER

5. LEGAL DESCRIPTION OF PROPERTY ON WHICH WATER IS TO BE USED

ATTACH A COPY OF THE LEGAL DESCRIPTION OF THE PROPERTY (ON WHICH THE WATER WILL BE USED) TAKEN FROM
A REAL ESTATE CONTRACT, PROPERTY DEED OR TITLE INSURANCE POLICY. OR, COPY CAREFULLY IN THE SPACE BELOW.

See attached. Applicant will copies of legal

APPLICATION

WHAT IS YOUR INTEREST IN THE PROPERTY ON WHICH THE WATER IS TO BE USED (PROPERTY OWNER, LESSEE, CONTRACT PURCHASER, ETC.)

Owner

ARE THERE ANY EXISTING WATER RIGHTS RELATED TO THE LAND ON WHICH THE WATER IS TO BE USED (INCLUDING WATER PROVIDED BY IRRIGATION DISTRICTS OR DITCH COMPANIES.)

☒ YES

☐ NO

IF YES, FROM WHAT SOURCE (i.e. SURFACE OR GROUND WATER) AND UNDER WHAT AUTHORITY

"Upper Altamun Ditch"

6. DESCRIPTION OF SYSTEM PROPOSED OR INSTALLED

(FOR EXAMPLE: SIZE OF PUMP, CAPACITY OF PUMP, PUMP MOTOR HORSE POWER, PIPE DIAMETER, NUMBER OF SPRINKLERS, ETC.)

20 acres to be frost protected
Up to 12" well, existing sprinklers (under tree)

REMARKS

7. Temporary requested. Wants to begin frost protecting right away.

IF 10 ACRE-FEET OR MORE OF WATER IS TO BE STORED AND/OR IF THE WATER DEPTH WILL BE 10 FEET OR MORE AT THE DEEPEST POINT, A STORAGE PERMIT MUST BE FILED IN ADDITION TO THIS PERMIT. THESE FORMS CAN BE SECURED, TOGETHER WITH INSTRUCTIONS, FROM THE DEPARTMENT OF ECOLOGY.

SIGNATURES

James M. Campbell
APPLICANT'S SIGNATURE

James M. Campbell
LEGAL LANDOWNER'S SIGNATURE (OWNER OF PROPERTY DESCRIBED IN ITEM NUMBER 5)

LEGAL LANDOWNERS NAME
(PLEASE PRINT)

LEGAL LANDOWNER'S ADDRESS

FOR OFFICE USE ONLY

STATE OF WASHINGTON }
DEPARTMENT OF ECOLOGY } SS.

This is to certify that I have examined this application together with the accompanying maps and data, and am returning it for correction or completion as follows:

.....
In order to retain its priority date, this application must be returned to the Department of Ecology, with corrections, on or before....., 19.....

Witness my hand this.....day of....., 19.....